

# Congresswoman Lynn Jenkins

## Internship Application

### Personal Information

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Email \_\_\_\_\_ Date of Birth \_\_\_\_\_

College Attending \_\_\_\_\_ Major \_\_\_\_\_

GPA \_\_\_\_\_ Year (e.g. Senior) \_\_\_\_\_ Anticipated Graduation Date \_\_\_\_\_

Parent/Guardian Names \_\_\_\_\_

### College Address

Street Address \_\_\_\_\_ Apartment No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone Number \_\_\_\_\_ Cell Phone Number \_\_\_\_\_

### Permanent Home Address

Street Address \_\_\_\_\_ Apartment No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

### Internship Details

Applying for: \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_ Fall \_\_\_\_\_ Dates Available: \_\_\_\_\_

Please list the names and phone numbers of the individuals that are writing letters of recommendation for you

1. Name \_\_\_\_\_ Phone Number \_\_\_\_\_

2. Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Please check the office location for which you are applying:

\_\_\_\_\_ Topeka, KS \_\_\_\_\_ Washington, DC

### Please include the following with this application form:

1. A complete resume including past work experiences
2. A one page personal statement outlining your internship goals
3. Two letters of recommendation from persons familiar with your work/academics, such as recent professors or former employers

**Please fax all application materials to (202) 225-7986**